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## EVALUATOR MANUAL TRANSMITTAL SHEET

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**Distribution:**

     All Child Care Evaluator Manual Holders  
  X   All Residential Care Evaluator Manual Holders  
     All Evaluator Manual Holders

**Transmittal No.**  
02APX-13**Date Issued**

November 2002

**Subject:**

Appendix C – SSI/SSP Payment Schedules effective January 1, 2003.

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**Reason For Change:**

To incorporate the new SSI/SSP Payment Standards into the Appendix Section (APX C)

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**Filing Instructions:**  X   REMOVE – SSI/SSP Payment Standards effective January 1, 2002  X   INSERT – SSI/SSP Payment Standards effective January 1, 2003

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**Approved:**

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CAROLE JACOBI, Chief  
Policy Development Bureau

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Date

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Phone Number: 916-322-3178

STATE OF CALIFORNIA  
DEPARTMENT OF SOCIAL SERVICES  
ADMINISTRATION DIVISION

ESTIMATED SSI/SSP PAYMENT STANDARDS  
EFFECTIVE JUNE 1, 2003  
Includes the 1/03 CPI COLA and a 3.74 percent CPI COLA

ESTIMATES BRANCH  
November 2002

CNI: 3.74% (a)  
CPI: 1.40% (a)

	INDEPENDENT LIVING			REDUCED NEEDS			NON-MEDICAL OUT-OF-HOME CARE 1/ (NMOHC)					
	RESIDING IN OWN HOUSEHOLD			HOUSEHOLD OF ANOTHER WITH IN-KIND ROOM & BOARD			HOUSEHOLD OF RELATIVE WITH IN-KIND ROOM & BOARD			IN LICENSED FACILITY OR HOUSEHOLD OF RELATIVE WITHOUT IN-KIND ROOM & BOARD		
	TOTAL	SSI	SSP	TOTAL	SSI	SSP	TOTAL	SSI	SSP	TOTAL	SSI	SSP
<b><u>INDIVIDUAL:</u></b>												
AGED OR DISABLED	<b>778.00</b>	552.00	226.00	<b>595.00</b>	368.00	227.00	<b>764.00</b>	368.00	396.00	<b>952.00</b>	552.00	400.00
- without cooking facilities (RMA) 2/	<b>860.00</b>	552.00	308.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BLIND	<b>842.00</b>	552.00	290.00	<b>674.00</b>	368.00	306.00	<b>764.00</b>	368.00	396.00	<b>952.00</b>	552.00	400.00
DISABLED MINOR												
- living with parents(s)	<b>667.00</b>	552.00	115.00	<b>473.00</b>	368.00	105.00						
- living with non-parent relative or non-relative guardian							<b>764.00</b>	368.00	396.00	<b>952.00</b>	552.00	400.00
<b><u>COUPLE:</u></b>												
AGED OR DISABLED												
- per couple	<b>1,382.00</b>	829.00	553.00	<b>1,132.00</b>	552.67	579.33	<b>1,570.00</b>	552.67	1,017.33	<b>1,904.00</b>	829.00	1,075.00
- without cooking facilities (RMA) 2/	<b>1,546.00</b>	829.00	717.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BLIND												
- per couple	<b>1,602.00</b>	829.00	773.00	<b>1,353.00</b>	552.67	800.33	<b>1,570.00</b>	552.67	1,017.33	<b>1,904.00</b>	829.00	1,075.00
BLIND/AGED OR DISABLED												
- per couple	<b>1,520.00</b>	829.00	691.00	<b>1,269.00</b>	552.67	716.33	<b>1,570.00</b>	552.67	1,017.33	<b>1,904.00</b>	829.00	1,075.00

TITLE XIX MEDICAL FACILITY

		Individual	Couple
Total		\$49	\$98
SSI		30	60
SSP		19	38

1/ NON-MEDICAL OUT-OF-HOME CARE

Personal and Incidental Needs Maximum	\$194	Minimum	\$110
Care and Supervision Minimum	\$349	Maximum	\$433
Board and Room	\$409		\$409

2/ RMA – Restaurant Meals Allowance - \$82 Individual; \$164 Couple

